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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

2

Application Number 10/008,955

Filing Date December 7, 2001

First Named Inventor Hans Klingemann

Art Unit 1644

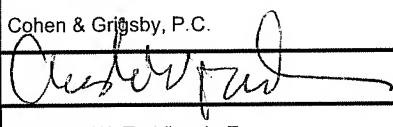
Examiner Name Ronald B. Schwadron

Attorney Docket Number 096937-0019

ENCLOSURES (Check all that apply)

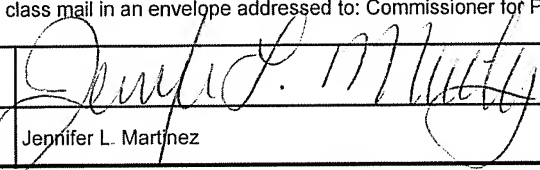
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
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<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="text"/> Remarks	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	Power of Attorney and Correspondence Address Indication Form	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Cohen & Grigsby, P.C.		
Signature			
Printed name	Christine W. Trebilcock, Esq.		
Date	September 7, 2006	Reg. No.	41,373

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POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

Application Number	10/008,955
Filing Date	December 7, 2001
First Named Inventor	Hans Klingemann
Title	NATURAL KILLER CELL LINES...
Art Unit	1644
Examiner Name	Ronald B. Schwadron
Attorney Docket Number	096937-0019

I hereby revoke all previous powers of attorney given in the above-identified application.

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I am the:

☒ Applicant/Inventor☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature

Date

Name

Hans Klingemann

Telephone

617-636-2520

Title and Company

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ *Total of 1 forms are submitted.

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